

It is the intent of the tank(s) owner, to Permanently Close the tank(s) listed below in the manner indicated.  
All tanks will be empty and clean, free of all liquids and sludges as required in 40 CFR, Part 280.71 [b].

## NOTIFICATION OF TANK CLOSURE

RECEIVED  
N.C. Department of  
CD

SEP 21 1989

OWNERSHIP OF TANK(S)	LOCATION OF TANK(S)
Name: <u>(North State Milling Company)</u>	<u>Winston-Salem</u> <u>Regional Office</u>
Address: <u>816 South Elm Street</u>	Site Name: <u>Same</u>
<u>Greensboro, NC 27406</u>	Address: _____
Phone Number: <u>275-1355</u>	County: <u>Guilford</u>

TANKS FOR CLOSURE			
TANK NUMBER	TANK CAPACITY	LAST CONTENTS	CLOSURE METHOD
Tank 1	<u>3,000</u>	<u>Gas</u>	X <u>To Be Removed</u> <u>To Be Filled</u>
Tank 2	<u>3,000</u>	<u>Diesel</u>	X <u>To Be Removed</u> <u>To Be Filled</u>
Tank 3	_____	_____	<u>To Be Removed</u> <u>To Be Filled</u>
Tank 4	_____	_____	<u>To Be Removed</u> <u>To Be Filled</u>
Tank 5	_____	_____	<u>To Be Removed</u> <u>To Be Filled</u>

TANK(S) CLOSURE OPERATIONS TO BE PERFORMED BY:	
(Contractor) Name: <u>Piedmont Environmental Services, Inc.</u>	
Address: <u>P. O. Box 8861</u> <u>Greensboro,</u> State <u>NC</u> Zip <u>27419</u>	
Contact: <u>Bill Stewart</u> Phone: <u>(919) 668-4821</u>	
<u>yes</u>	Is this operator knowledgeable of the requirements for the removal/filling of underground storage tanks ?
<u>yes</u>	Is this operator and employees medically monitored as required by OSHA 29 CFR, Part 1910.120 [f] ?
<u>yes</u>	Is this operator and employees specifically trained as required by OSHA 29 CFR, Part 1910.120 [e] ?

TANK(S) CLOSURE ASSESSMENT TO BE PERFORMED BY:	
(Contractor) Name: <u>Piedmont Environmental Services, Inc.</u>	
Address: <u>P. O. Box 8861</u> <u>Greensboro,</u> State <u>NC</u> Zip <u>27419</u>	
Contact: <u>Guilford Labs</u> Phone: <u>274-2907</u>	
_____	Is this operator knowledgeable of requirements for the closure assessment in 40 CFR, Part 280.72 ?
_____	Is this operator and employees medically monitored as required by OSHA 29 CFR, Part 1910.120 [f] ?
_____	Is this operator and employees specifically trained as required by OSHA 29 CFR, Part 1910.120 [e] ?

NOTIFICATION SUBMITTAL / NOTIFICATION DATE	
Name: <u>Bill Stewart</u>	Scheduled Removal Date: <u>10-20-89</u>
Signature: <u>Bill Stewart</u>	Date Submitted: <u>9-19-89</u>

Tank owners are required to notify the implementing state agency at least 30 days before a Permanent Tank Closure as required in 40 CFR, Part 280.71 [a]. For further information contact the U. S. Environmental Protection Agency RCRA / Superfund Hotline at 800-424-9346